

**11. 510(k) Summary**

<b>510(k) Summary</b>	
Name of Firm:	Synthes Spine 1302 Wrights Lane East West Chester, PA 19380
510(k) Contact:	Monika McDole-Russell Regulatory Affairs Specialist, Synthes Spine Telephone: 610-719-5448 Facsimile: 610-719-5102 Email: mcdole-russell.monika@synthes.com
Date Prepared:	June 22, 2012
Trade Name:	Synthes Zero-P VA
Classification:	21 CFR 888.3080 – Intervertebral body fusion device Class II (special controls) Orthopaedic and Rehabilitation Devices Panel (87) Product Code OVE (Intervertebral Fusion Device with Integrated Fixation, Cervical)
Predicates:	Synthes Zero-P device (K093762, K112459) Synthes Zero-P VA device (K112068)
Device Description:	The Synthes Zero-P VA is a radiolucent and radiopaque intervertebral body fusion device. The Synthes Zero-P VA is composed of a spacer made from Invibio® PEEK-Optima® LT-1 (ASTM F2026) with a single posterior titanium alloy (Ti-6Al-4V ELI; TAV; ASTM F136-2a) radiopaque marker. The marker allows accurate intra-operative radiographic assessment of the position of the implant. The spacer component is preassembled with a mating titanium alloy (Ti-6Al-7Nb; TAN; ASTM F1295) interbody plate. The device is implanted anteriorly by inserting two screws (TAN) through the plate, one screw per vertebral body. The interbody plate incorporates a lock-catch mechanism in each screw hole comprised of a TAV lock-screw and catch, as well as an Elgiloy (ASTM F1058) spring. The screws offered with the Zero-P VA system are 3.7mm in diameter and are currently offered non-sterile. This line extension covers the addition of sterile-packed screws.
Intended Use/ Indications for Use:	The Synthes Zero-P VA is a stand-alone anterior cervical interbody fusion device indicated for use in skeletally mature patients with degenerative disc disease (DDD) with accompanying radicular symptoms at one level from C2-T1. DDD is defined as discogenic pain with degeneration of the disc confirmed by history and radiographic studies. These patients should have had six weeks of non-operative treatment. The interior of the spacer component of the Synthes Zero-P VA should be packed with autogenous bone

Synthes Zero-P VA – Sterile-Packed Screws  
Special 510(k)

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	graft and implanted via an anterior approach.
Comparison of the device to predicate device(s):	The modifications herein presented to the Synthes Zero-P VA device are substantially equivalent to the above referenced predicates in design, function, and intended use.
Performance Date (Nonclinical and/or Clinical):	<i>Non-Clinical Performance and Conclusions:</i> Non-clinical performance data and conclusions were not needed for this device.  <i>Clinical Performance and Conclusions</i> Clinical data and conclusions were not needed for this device.



Food and Drug Administration  
10903 New Hampshire Avenue  
Document Control Room -WO66-G609  
Silver Spring, MD 20993-0002

Synthes Spine  
% Ms. Monika McDole-Russell  
Regulatory Affairs Specialist  
1302 Wrights Lane East  
West Chester, Pennsylvania 19380

JUL 25 2012

Re: K121852

Trade/Device Name: Synthes Zero-P VA  
Regulation Number: 21 CFR 888.3080  
Regulation Name: Intervertebral body fusion device  
Regulatory Class: Class II  
Product Code: OVE  
Dated: June 22, 2012  
Received: June 25, 2012

Dear Ms. McDole-Russell:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set

forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to <http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm> for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to <http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm> for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address <http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm>.

Sincerely yours,



Mark N. Melkerson  
Director  
Division of Surgical, Orthopedic  
and Restorative Device  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

**10. Indications for Use Statement**

510(k) Number: K 121852  
(if known)

Device Name: Synthes Zero-P VA

Indications for Use: The Synthes Zero-P VA is a stand-alone anterior cervical interbody fusion device indicated for use in skeletally mature patients with degenerative disc disease (DDD) with accompanying radicular symptoms at one level from C2-T1. DDD is defined as discogenic pain with degeneration of the disc confirmed by history and radiographic studies. These patients should have had six weeks of non-operative treatment. The interior of the spacer component of the Synthes Zero-P VA should be packed with autogenous bone graft and implanted via an anterior approach.

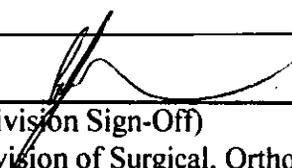
Prescription Use   
(21 CFR 801 Subpart D)

AND / OR

Over-the-Counter Use  
(21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE – CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

  
\_\_\_\_\_  
(Division Sign-Off)  
Division of Surgical, Orthopedic,  
and Restorative Devices

sheet 1 of 1

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